

Indonesia Reproduksi Sehat: *A life cycle approach to reproductive health*



Academic Health System Universitas Indonesia - Indonesian Medical Education and Research Institute

Faculty of Medicine Universitas Indonesia

Dr. Cipto Mangunkusumo General Hospital

Jakarta



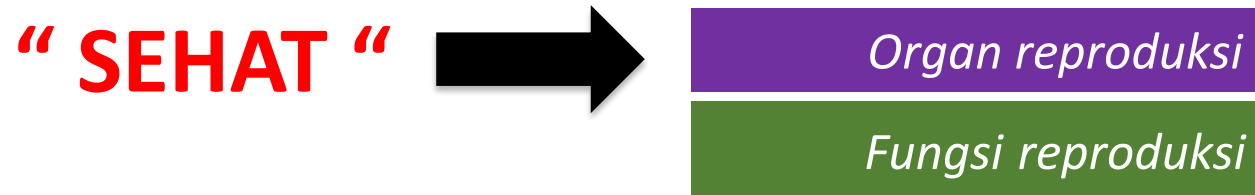
Ban Ki Moon





KESEHATAN REPRODUKSI

World Health Organization



- Populasi total 237,641,326 (SDKI, 2011)
- Pasangan usia subur \pm 39.8 juta (SDKI, 2008)
- **GANGGUAN KESUBURAN 10-15% → 4 JUTA**

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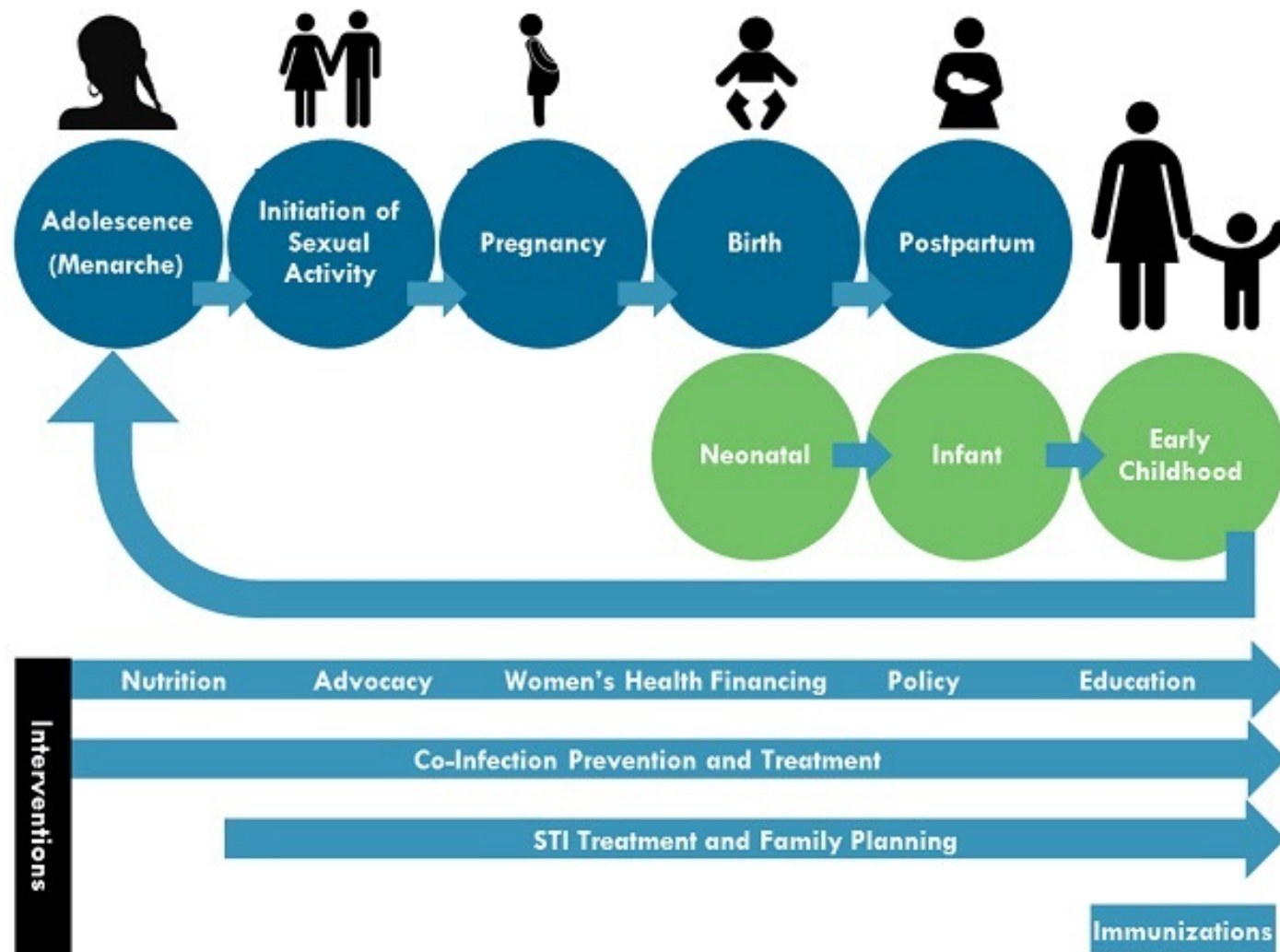


A life course approach to reproductive health: Theory and methods

Gita D. Mishra*, Rachel Cooper, Diana Kuh

MRC Unit for Lifelong Health and Ageing, Department of Epidemiology and Public Health, University College and Royal Free Medical School, 33 Bedford Place

Taking **a life course approach** to the study of reproductive health involves the investigation of factors across life and, also across generations, that influence the timing of menarche, fertility, pregnancy outcomes, gynaecological disorders, and age at menopause.



Research explores **potential impact and benefits throughout the lifecycle**, from pregnancy, to neonate, to child, to adolescent, to next generation reproductive health.

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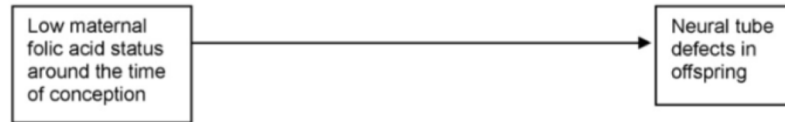
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Critical/sensitive periods models

1. With or without
effects of later life
risk factors

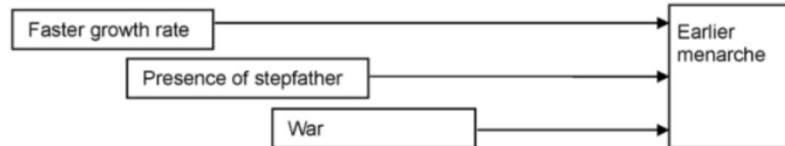


2. With effects of later
life effect modifiers



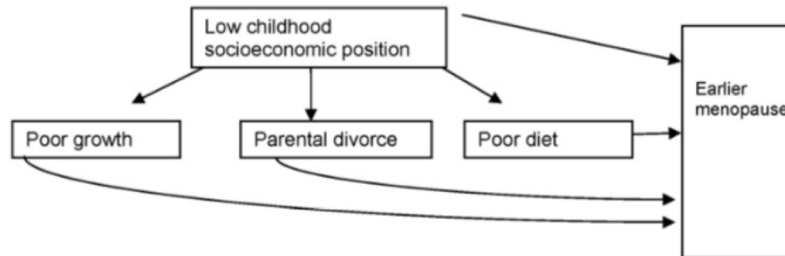
Accumulation of risk models

3. Independent and
uncorrelated insults

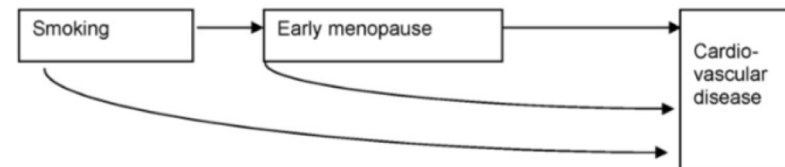


4. Correlated insults

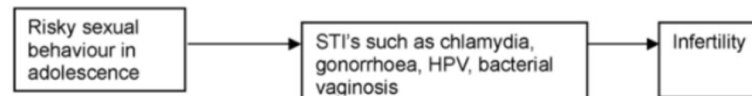
a) Risk clustering models



- b) Chains of risk model:
Additive models

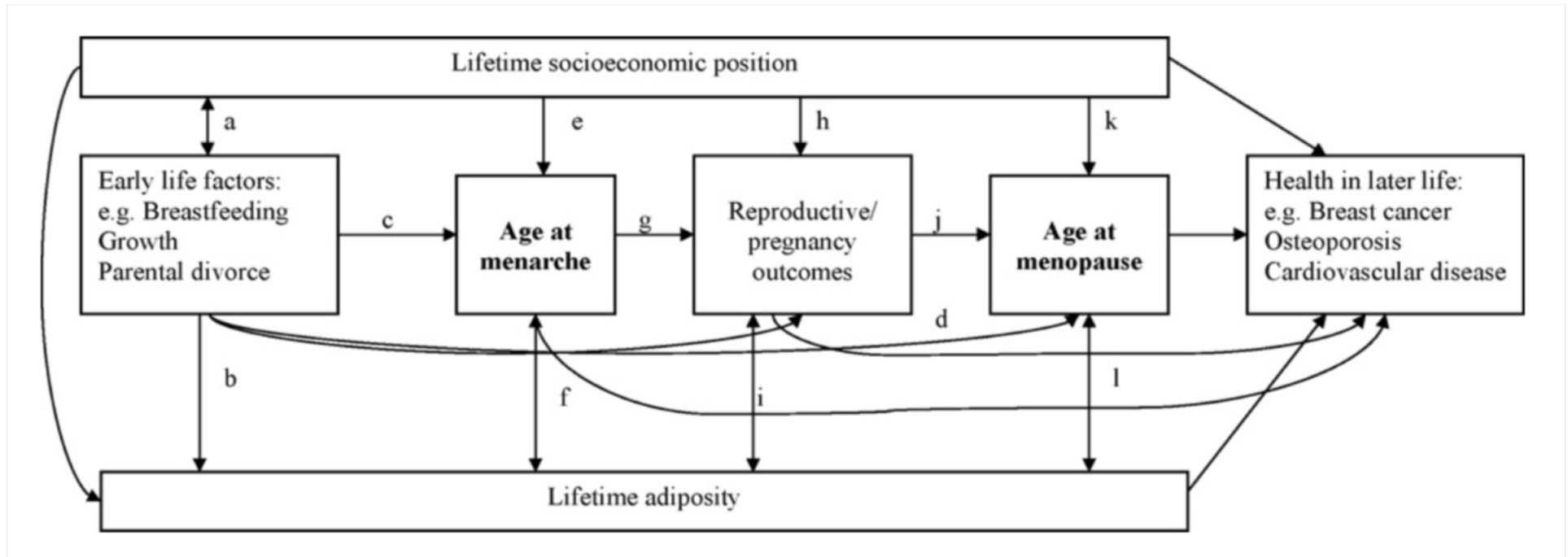


- c) Chains of risk model:
Trigger models



Life course models with
illustrative examples.

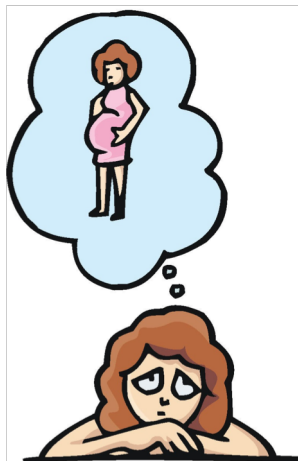
A life course approach to reproductive health: Theory and methods



A schematic representation of **biological and social factors acting across the life course** that may influence the timing of menarche and menopause.

KONSEP KESEHATAN REPRODUKSI

- In vitro fertilization
- Pre implantation diagnosis
- Fetal programming
- Implantation
- **Metabolic syndrome (PCOS)**
- **Endometriosis**
- Recurrent miscarriages
- Infection



Pra-konsepsi

- Prenatal diagnosis
- **High risk pregnancy (pre-eclampsia, preterm, IUGR, etc)**
- Fetal programming



Intra-uterin

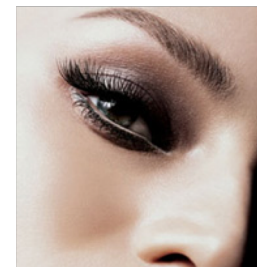
1000 HPK

- Disorders of sex development
- Menstrual disturbances
- **Puberty**
- **Contraception**
- Malignancy



Anak-remaja

- Pregnancy
- Severe pre-eclampsia
- Preterm birth
- Post partum hemorrhage
- **Contraception**
- **Malignancy**
- Abnormal uterine bleeding
- **Urogenital tract**

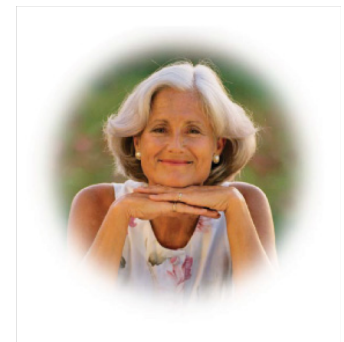


Dewasa

INDIKATOR

1. AKI dan AKB
2. *Stunting*
3. Kanker serviks
4. Kontrasepsi
5. Urogenital (prolaps organ panggul dan inkontinensia)

- **Urogenital tract**
- Osteoporosis
- **Climacteric**
- Metabolic syndrome
- **Malignancy**
- Urogenital tract
- Abnormal uterine bleeding



Menopause

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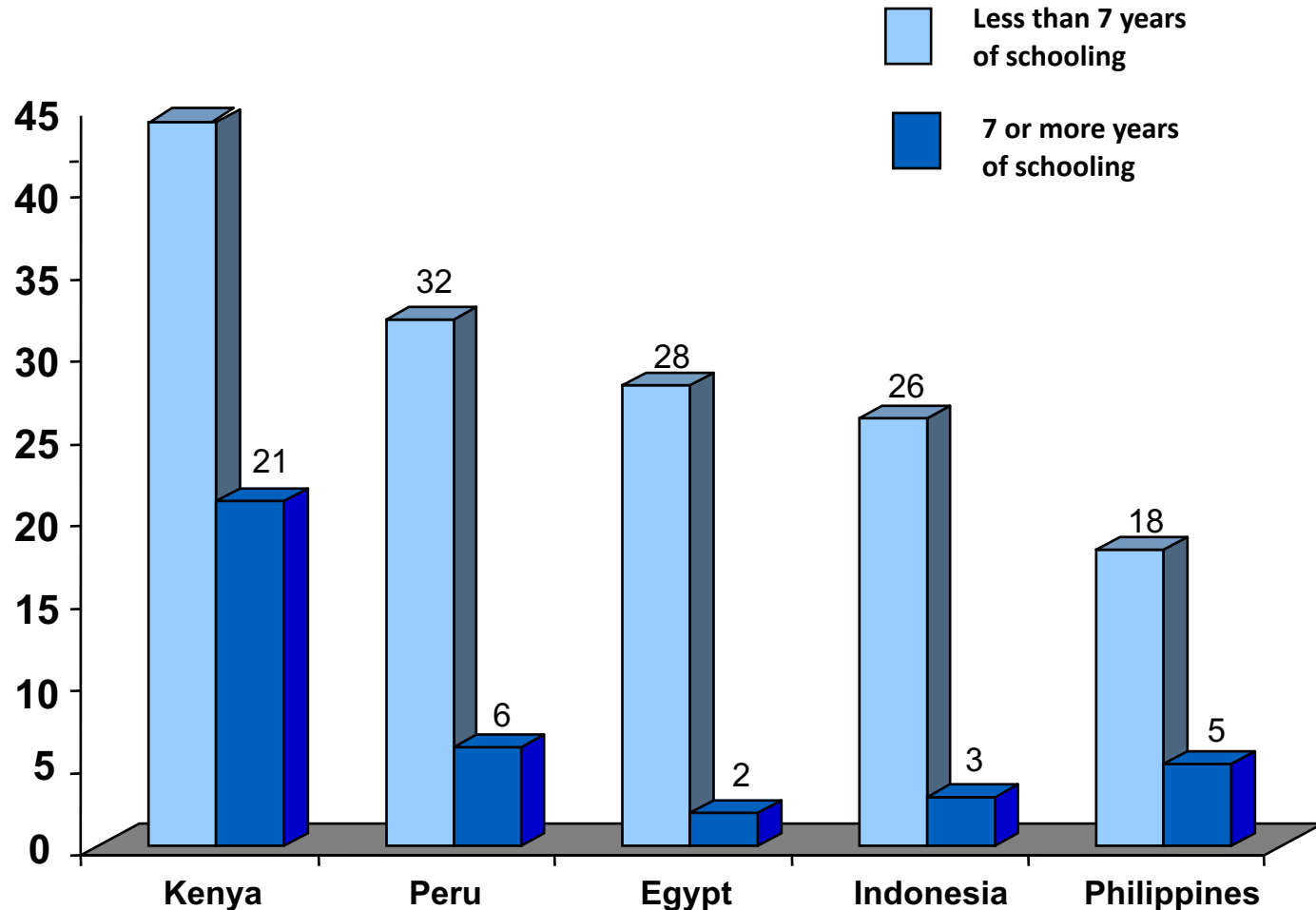
Health and Welfare of Women and Child Survival: A Key to Nation Building

Education is the best investment to **improve the health and status of women and welfare of their children**. It is a sad reality that more than 62 million girls around the world have no access to education.

” If you educate a man, you educate an individual, but when you educate a woman, you educate the whole family and society. “

ADOLESCENT CHILDBEARING AND WOMEN'S EDUCATION

Percent of women ages 20-24 who gave birth by age 18,
by education level



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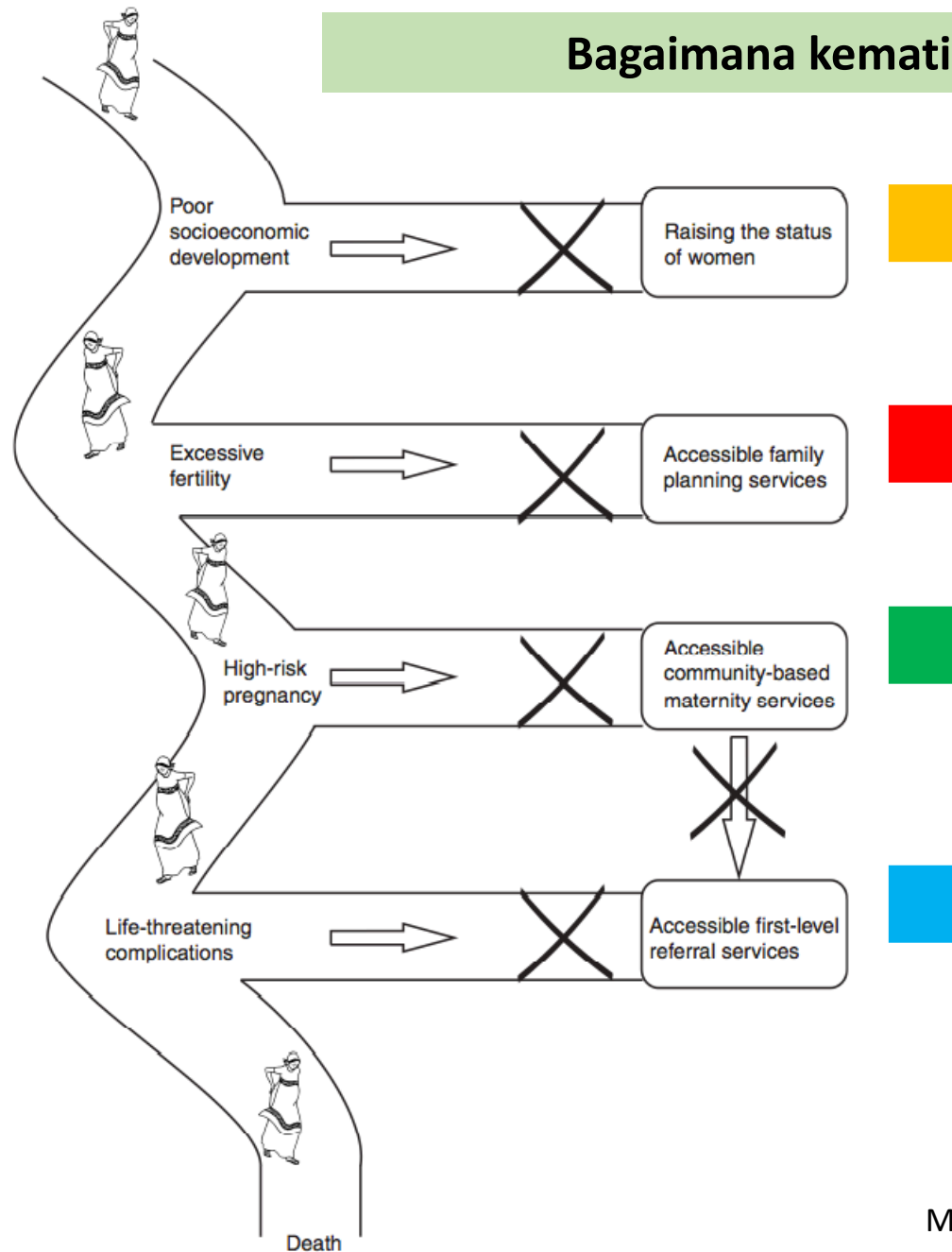
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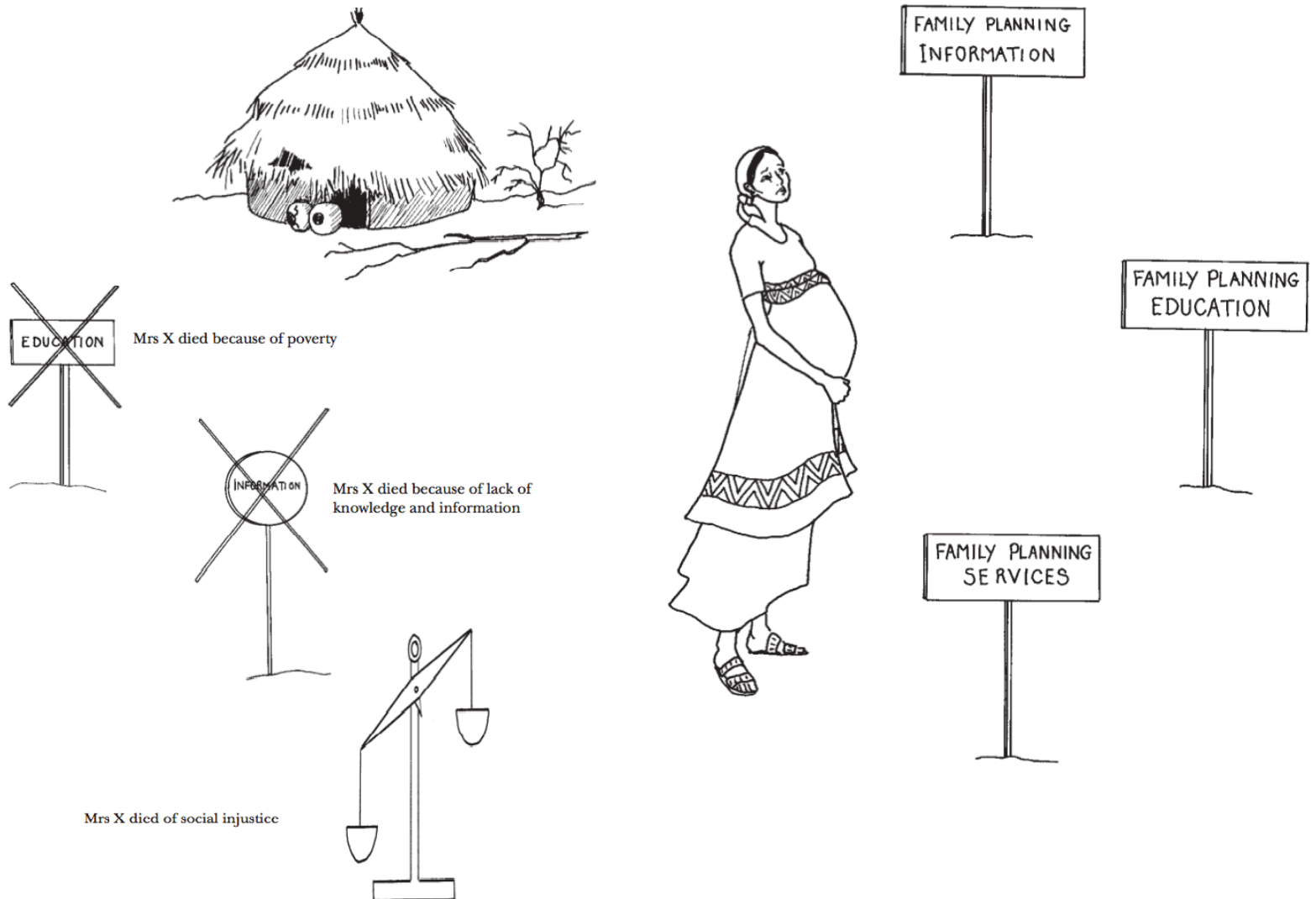
Bagaimana kematian ibu terjadi

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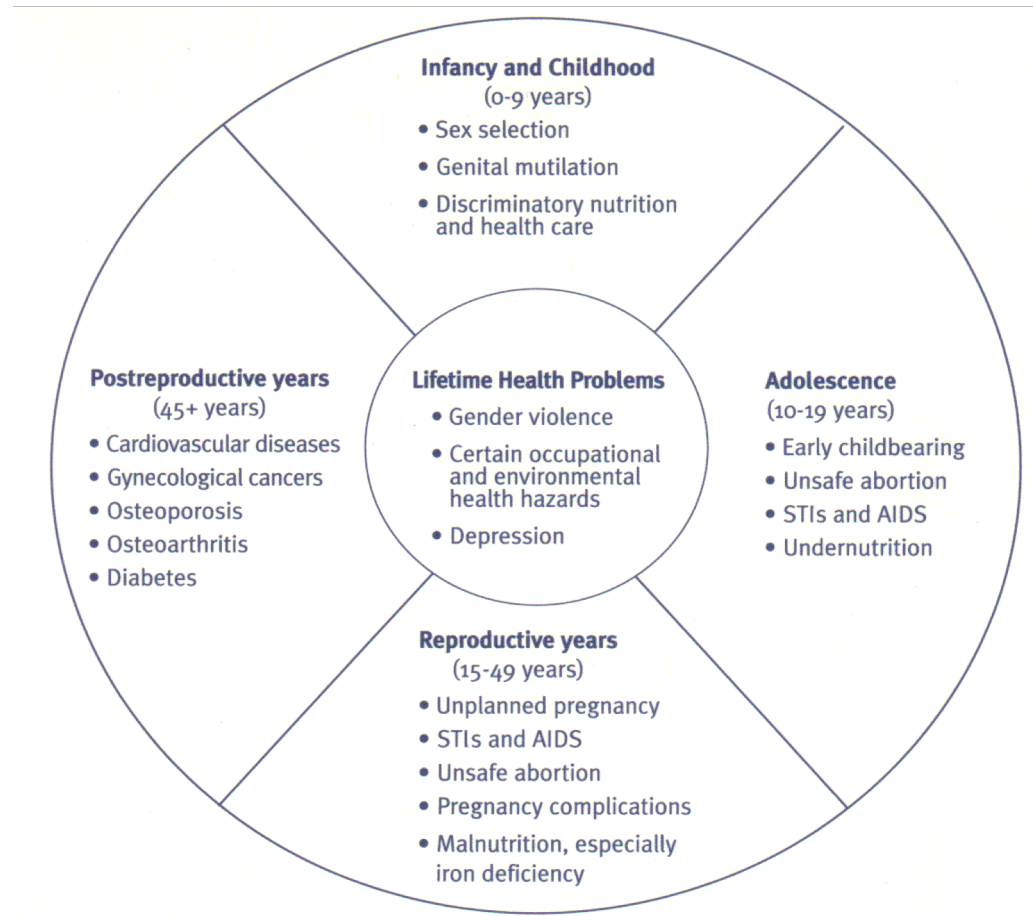
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Mahmoud Fatalla. How Mrs. X die

Health and nutritional problems affecting women during the life cycle



Women and girls have **special health needs throughout their lives**. Health systems should recognize and address women's health problems throughout the life cycle.

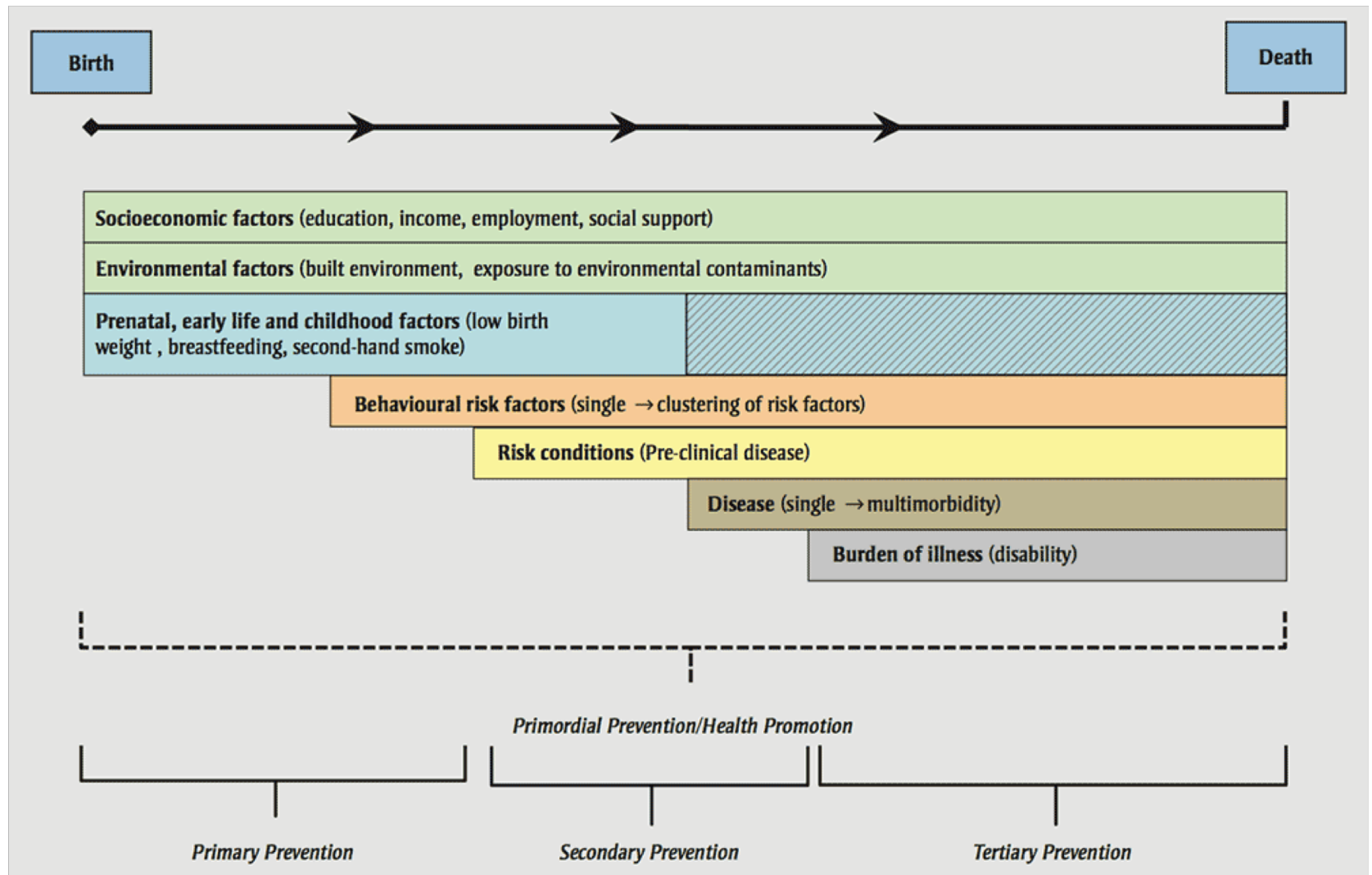
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LIFE COURSE APPROACH AND PRIMARY PREVENTION



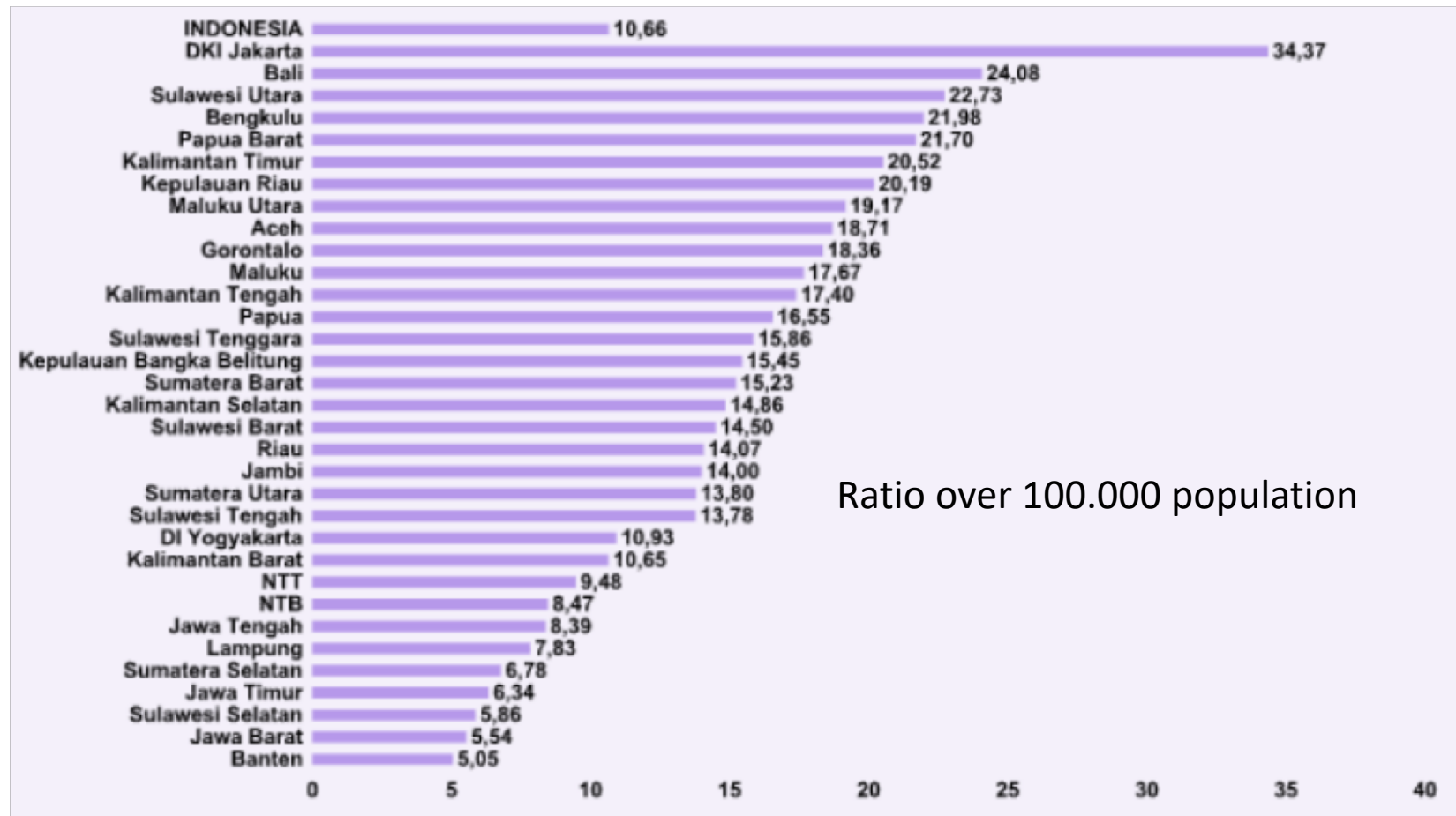
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Ratio of General Practitioner to Population in Indonesia



Smith. Human Resources for Health Country Profile. WHO Reg Off South-East Asia. .
WHO country profile 2(1):123–5 2015.

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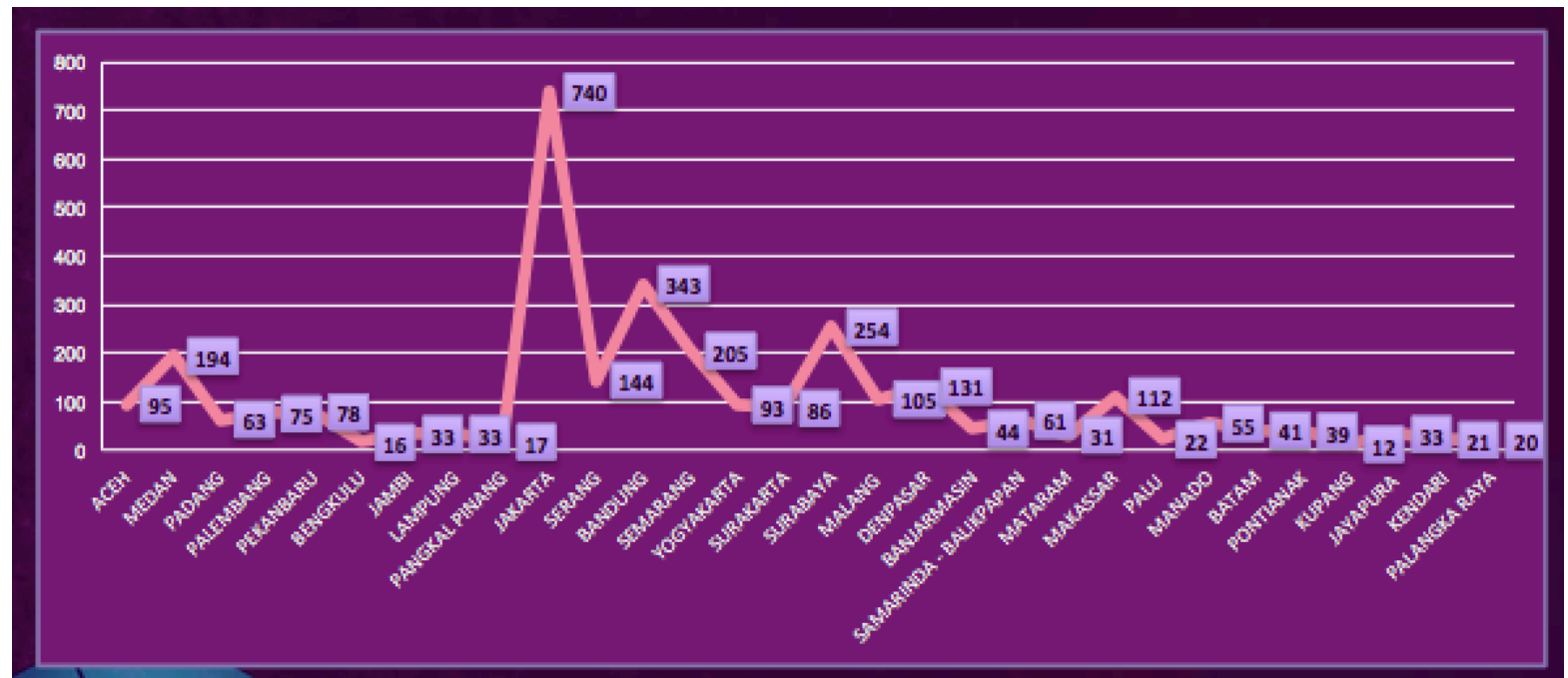
“ 3 DELAYS “

CAUSED OF MATERNAL DEATH

3 CASES

1. Delay to establish diagnosis
2. Delay to refer patients to the hospital
3. Delay to receive appropriate treatment

1. Severe bleeding
2. Hypertension
3. Infection



“ 25 - 30 percent obstetrician are located in Jakarta ”

Source: Indonesian Society of Obstetrics and Gynecology

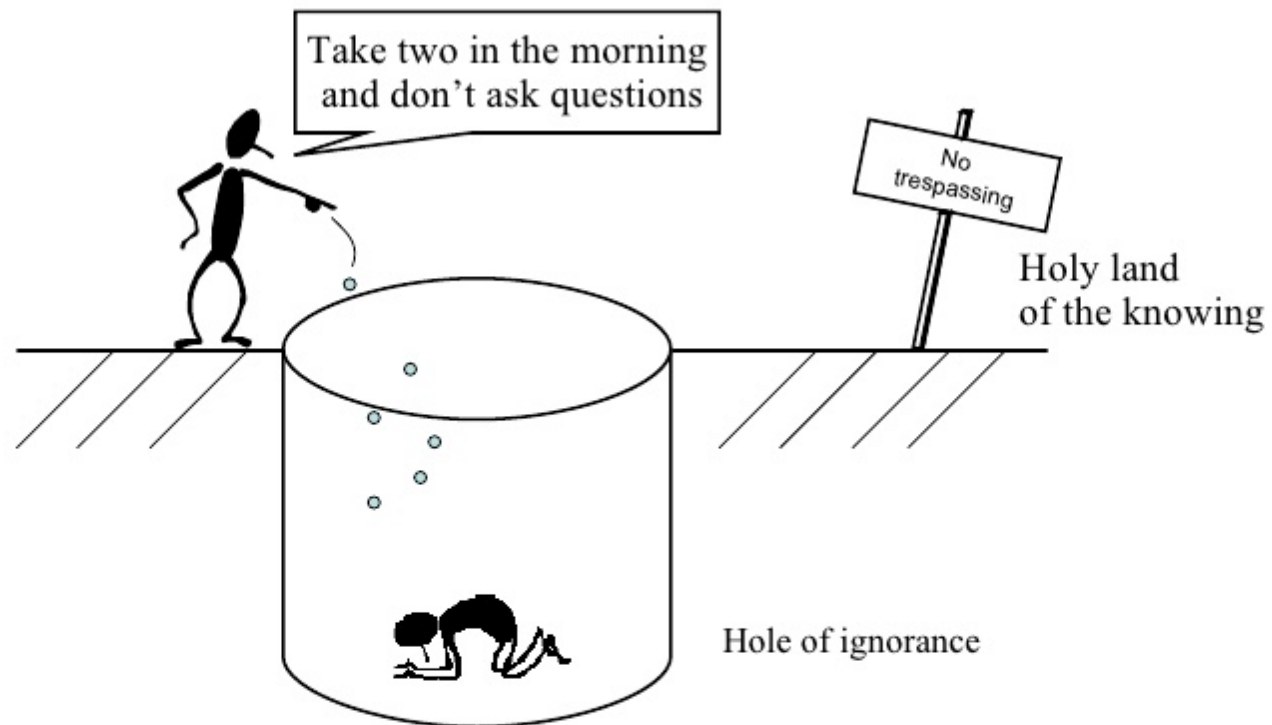
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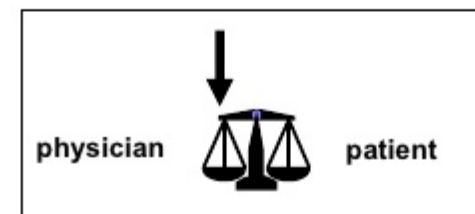
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Doctor's oriented health services



Eysenbach G, Jadad AR.
Consumer health informatics in the internet age.
<URL: <http://www.jmir.org/2001/2/e19/>>



New Paradigm

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A healthcare professional, likely a nurse or doctor, is shown from the chest up, wearing blue scrubs and a stethoscope. They are holding a tablet computer with both hands. The tablet screen displays a patient's medication list. At the top, it says "The patient is experiencing side effects today." Below this, there is a table with columns for "Medication", "Dose", "Frequency", and "Notes". The table lists several medications, including "Aspirin", "Ibuprofen", "Acetaminophen", and "Warfarin". The "Notes" column contains handwritten-style text, such as "Patient is experiencing side effects today" and "Patient is experiencing side effects today". The background is a plain, light-colored wall.

The consumers has **capability to retrieve information** and recommendation regarding disease, medication and treatments

Bosworth A, York C, Kotansky H, Berman MA.
An inventor's perspective on consumer health informatics. *Am J Prev Med*. 2011;40(5 Suppl 2):S241-4.

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THE FUTURE OF HEALTHCARE IS ALL ABOUT

THE EMPOWERED PATIENT

Patients are active participants in, **NOT PASSIVE** recipients of, the caring process, and thus should be **well informed** about all aspects of their health, wellness and diseases state to gain maximum health benefit

The Free Dictionary, 2016

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A life cycle approach to women's health

1. Anticipates and meets **women's health needs** from infancy through old age.
2. Emphasizes **health-seeking behavior** and appropriate services to meet women's health needs throughout their lives.
3. Recognizes **the right of all women** to make informed decisions about their health.



Indonesian Kalkulator Oocytes

incode online Medical

★★★★★ 55



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AMH TO BIOLOGICAL AGE

BIOLOGICAL AGE

29
years old

Enter AMH Level

3.5 ng/mL

7	8	9
4	5	6
1	2	3
C	0	.

ENTER

AGE TO AMH

AMH Level

1.4
ng/mL

Enter Biological Age

35 Years Old

7	8	9
4	5	6
1	2	3
C	0	ENTER

Normogram results in this study can be used as a **reference guide for the physician** when consulting with patients with infertility disorders

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AMH TO BIOLOGICAL AGE

BIOLOGICAL AGE

25
years old

Enter AMH Level

5.4 ng/mL

7	8	9
4	5	6
1	2	3
C	0	.

ENTER

AMH TO BIOLOGICAL AGE

BIOLOGICAL AGE

42
years old

Enter AMH Level

0.5 ng/mL

7	8	9
4	5	6
1	2	3
C	0	.

ENTER

Chronological Age	AMH Level	Biological Age
25 years old	5.4 ng / mL	25 years old
25 years old	0.5 ng / mL	42 years old

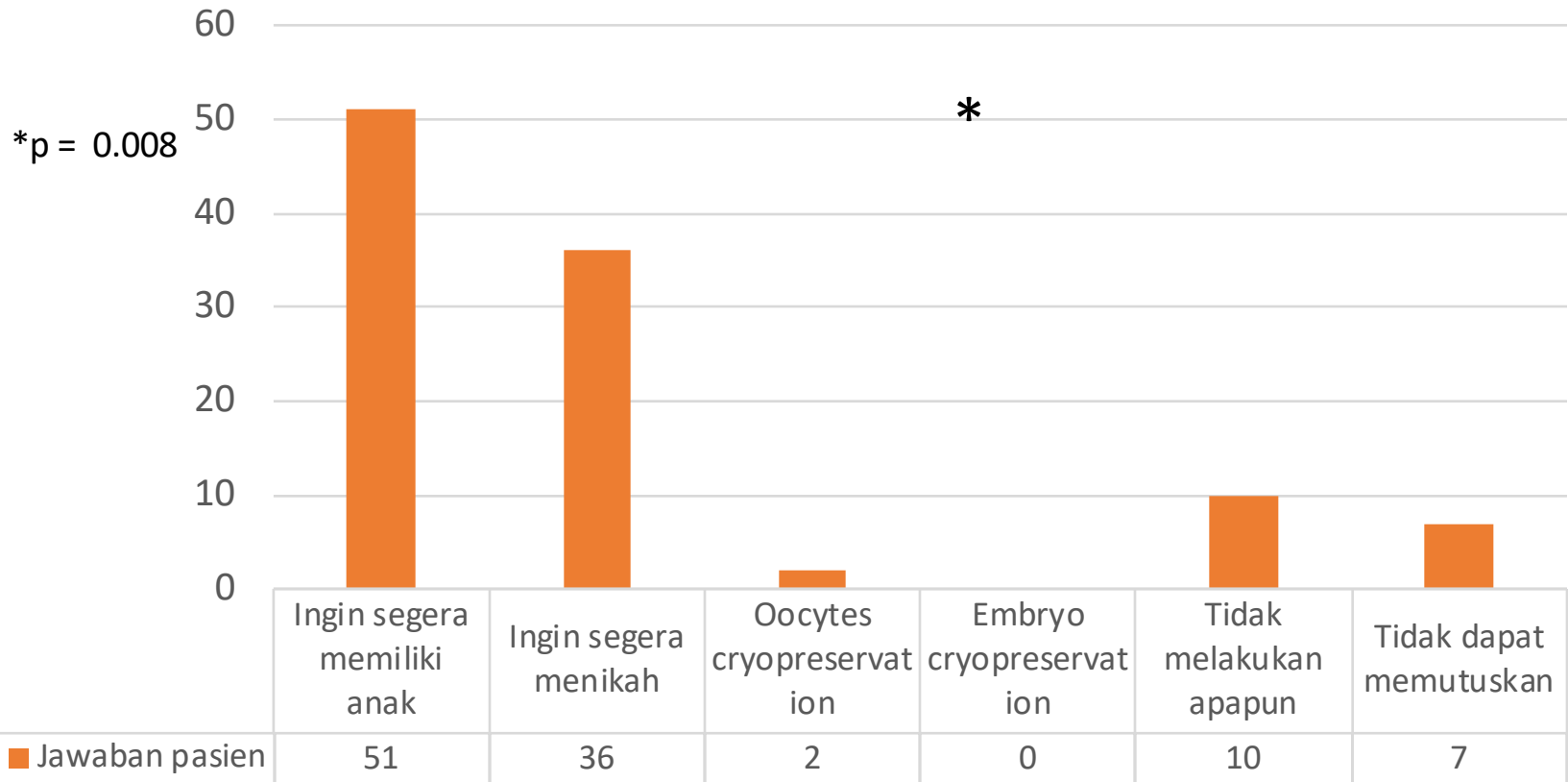
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TINDAKAN YANG DILAKUKAN SETELAH MENGETAHUI HASIL AMH & UMUR BIOLOGIS



Promotive and Preventive Approach

n = 106

Wiweko et al, 2018. Submitted



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TARGET PROGRAM

1. Antenatal and delivery care (PONED, PONEK, reporting and referral system).
2. Cervical cancer prevention (VIA screening, HPV vaccines, registry and reports)
3. Reproductive health and contraception (reproductive health, sexual transmitted infection, LARC)

JAKPROS Application for Increasing Knowledge and Engagement of Pregnant Women About Education in Pregnancy, Delivery, and Reproductive Health

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SpOG RSUK

sebagai ujung tombak program / *champion*

Camat
Lurah
TP-PKK

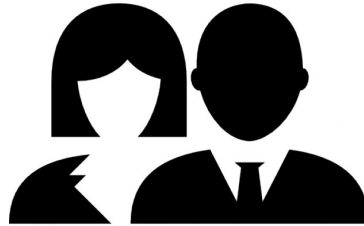
PPDS dan mahasiswa kedokteran



RSUK
PUSKESMAS
POSYANDU
BIDAN



SMP
SMA
RSUK
PUSKESMAS



RSUK
PUSKESMAS
POSYANDU
BIDAN
KUA



RSUK
PUSKESMAS
POSBINDU
PKK
PERUMAHAN
PERKANTORAN



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RSU Kecamatan



Jakarta Pusat

1. Johar Baru: 2 SpOG
2. Cempaka Putih: 1 SpOG
3. Matraman: 1 SpOG
4. Sawah Besar: 1 SpOG
5. Tanah Abang: 1 SpOG
6. Kemayoran: 1 SpOG

Jakarta Utara

1. Koja: 1 SpOG
2. Cilincing: 2 SpOG
3. Tanjung Priok: 1 SpOG
4. Pademangan: 1 SpOG

Jakarta Timur

1. Ciracas: 2 SpOG
2. Kramat Jati: 1 SpOG

Jakarta Selatan

1. Mampang: 2 SpOG
2. Tebet: 2 SpOG
3. Jagakarsa: 2 SpOG
4. Pesanggrahan: 3 SpOG

Jakarta Barat

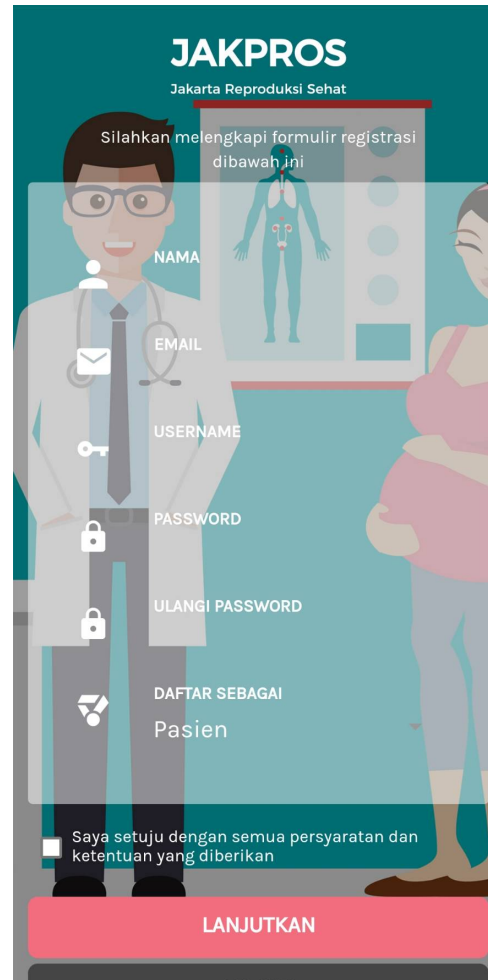
1. Taman Sari: 1 SpOG
2. Kalideres: 2 SpOG
3. Kembangan: 2 SpOG

19 RSU Kecamatan ; 28 SpOG

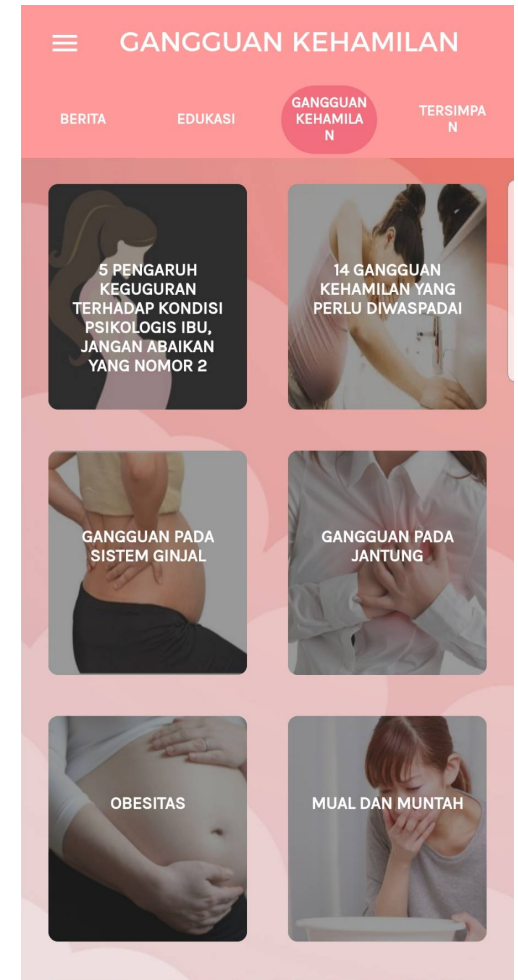


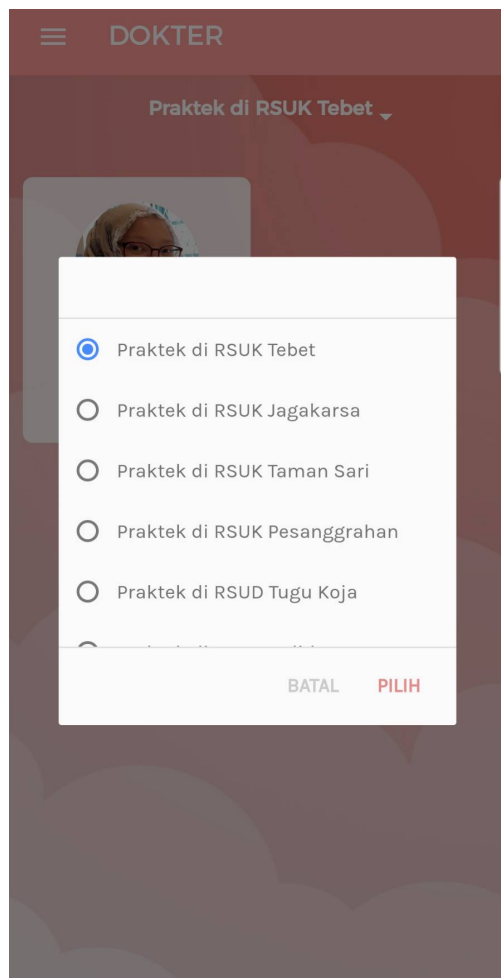
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Article page



Log in page





Doctor page



Hospital page



Schedule page



News page



QnA page



About page

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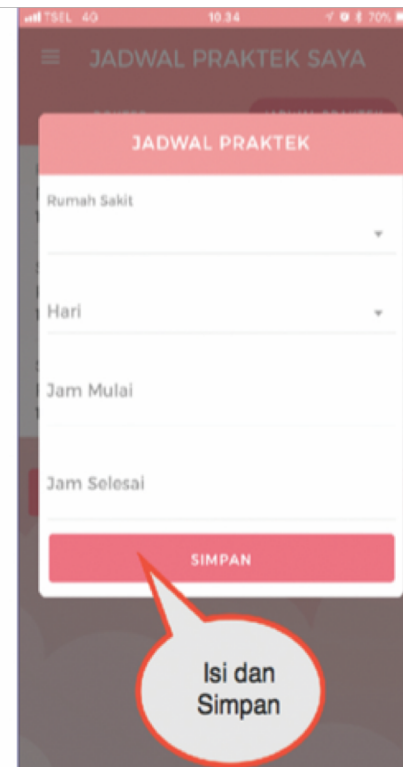
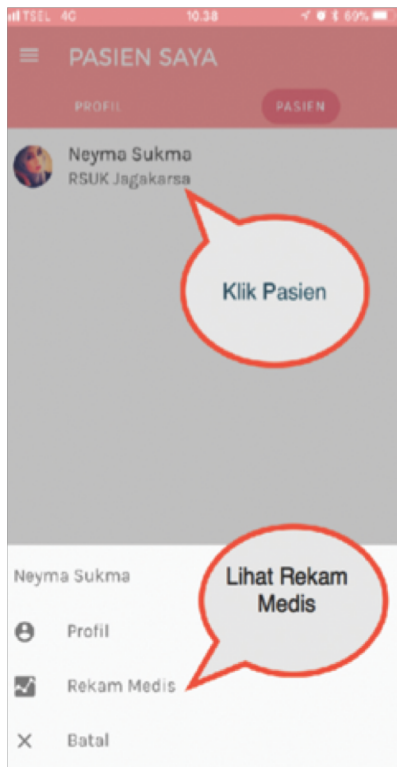
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Veritas, Probitas, Iustitia







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BACKGROUND

Maternal mortality is still a big issue in Indonesia. In these recent years, Indonesia hasn't reach MDG's goals yet. One of the strategies to achieve the MDG's target is to provide access to reliable health information, especially about pregnancy, delivery, and reproductive health and to facilitate patient to reach the closest health service centers. Our aim is to decrease the maternal mortality rate by increasing mother's knowledge, providing better platform and access to communicate with the obstetrician and gynecologists, and providing tools to locate nearest hospital and clinic.

METHOD

This study is a design study of sequential mixed methods study to 166 subjects of pregnant women in Obstetric and Gynecology Outpatient Clinic in Jakarta District Public Hospital. The Qualitative research will be conducted with Focus Group Discussion, while cross-sectional studies using questionnaires



9 district public hospital

Apps Downloaded



85 Doctor
166 Patient



166 pregnant women



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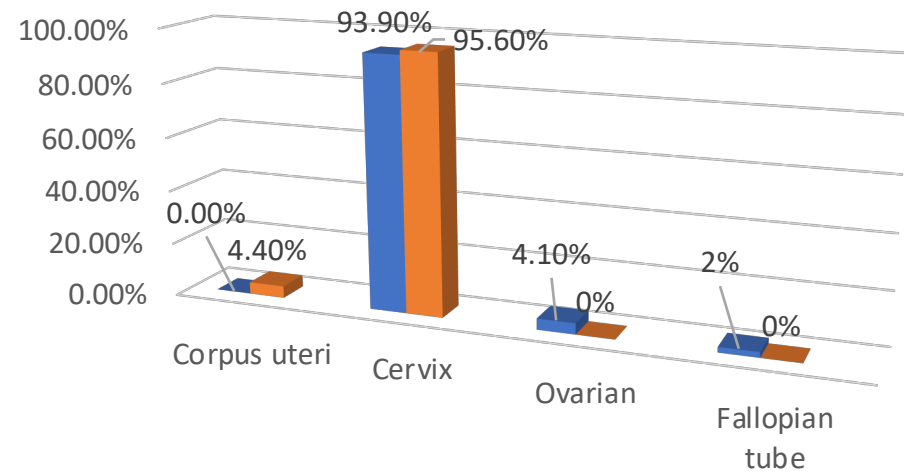
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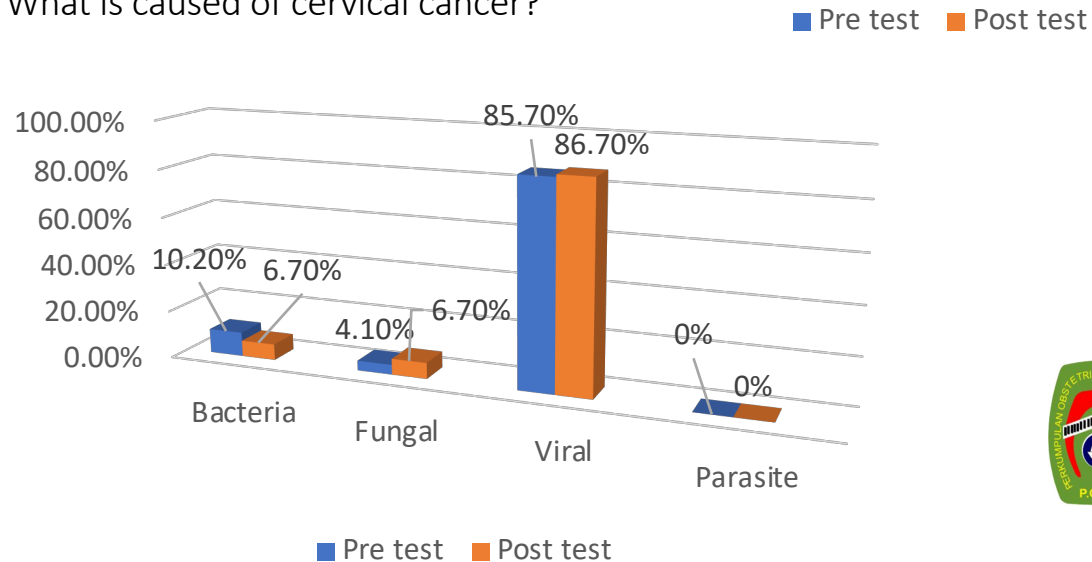


Cervical Cancer and Malignancy

1. Where is location of cervical cancer?

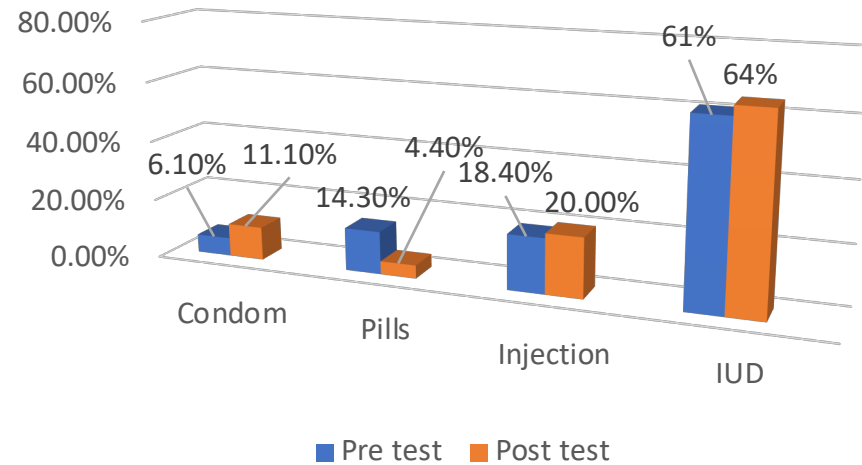


2. What is caused of cervical cancer?

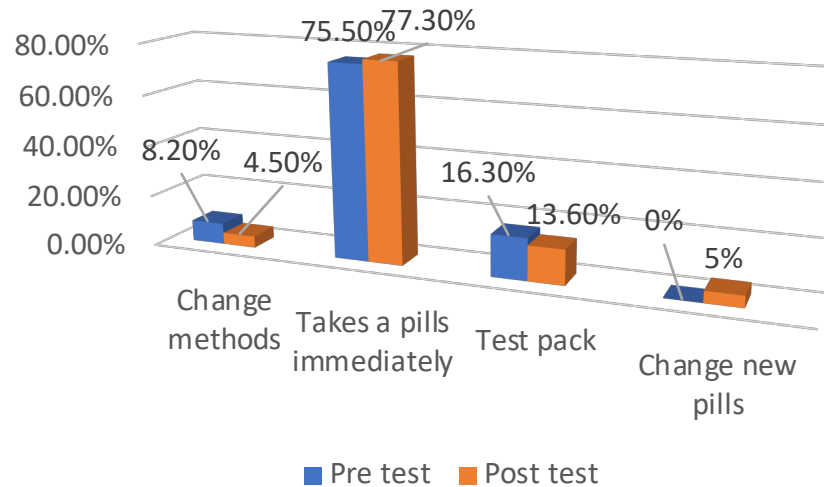


11. Which the most effective contraception method?

Contraception



12. If forget to takes a contraception pills, what will we do ?



STUDI KUALITATIF



Subyek 1

“ Kanker serviks adalah kanker yg muncul pada leher vagina, saya tau kanker ovarium, tanda kanker leher rahim berupa perdarahan, tanda kanker payudara adalah luka di sekitar payudara. Makanan sebagai faktor penyebab kanker serviks.

Cek darah untuk cek kanker serviks. Untuk terapi kanker saya pernah dengar mengenai krioterapi namun tidak tau pengertiannya, terapi lain yaitu angkat rahim.

Untuk pencegahan kita harus membersihkan kemaluan dengan benar, mengganti pembalut dan celana dalam secara teratur, melakukan vaksin HPV. Menurut saya orang yang sudah kontak seksual wajib melakukan pemeriksaan biar bisa mencegah dan pengobatan yang dilakukan lebih dini. ”

An Evaluation of Multimedia and Online Support Groups (OSG) Contents and Application of Information by Infertile Patients: Mixed Method Study

Budi Wiweko^{1,2,a)}, Shabrina Narasati², Prince Gusti Agung², Aulia Zesario², Yohanes Satrya Wibawa², Mila Maidarti^{1,2}, Achmad Kemal Harzif^{1,2}, Gita Pratama^{1,2}, Kanadi Sumapradja^{1,2}, Raden Muharam^{1,2}, Andon Hestiantoro^{1,2}

¹*Department of Obstetrics and Gynecology Faculty of Medicine Universitas Indonesia Dr. Cipto Mangunkusumo General Hospital*

²*Indonesian Reproductive Medicine Research and Training Center (INA- REPMED)*

This study is a mixed method study conducted from January – June 2016 at Yasmin IVF Clinic, Dr. Cipto Mangunkusumo General Hospital; and SMART IVF Clinic, Jakarta.

Qualitative analysis highlighted two issues: the information regarding **infertility services** in the **available multimedia and the OSG**; use of the available information by patients when deciding to use infertility services.

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The Indonesian Test-Tube Babies Facebook Club is a type of OSG which was evaluated in this study

“Honestly doc, initially I was embarrassed to come here. To seek treatment for infertility, because how do I explain to you how I felt. However, I tried browsing here and there before finally deciding to come here, and one of the pages I opened was the Indonesian Test-Tube Babies Facebook Club. **I read the comments, the moral support, and I was touched.** Initially, I feel embarrassing as I thought I was the only one with this infertility problem, but it turns out there are so many people going through the same thing. Also, they all do not feel embarrassed to fight, it is fascinating, and finally decided to come here.” (Respondent 11).

“ Merencanakan, menyiapkan dan menjaga kehamilan dengan baik berarti membangun bangsa “



sebelum hamil	hamil	neonatal dan bayi
100	270	630

1000 HPK + 100



Indonesian Kalkulator Oocytes

incode online Medical

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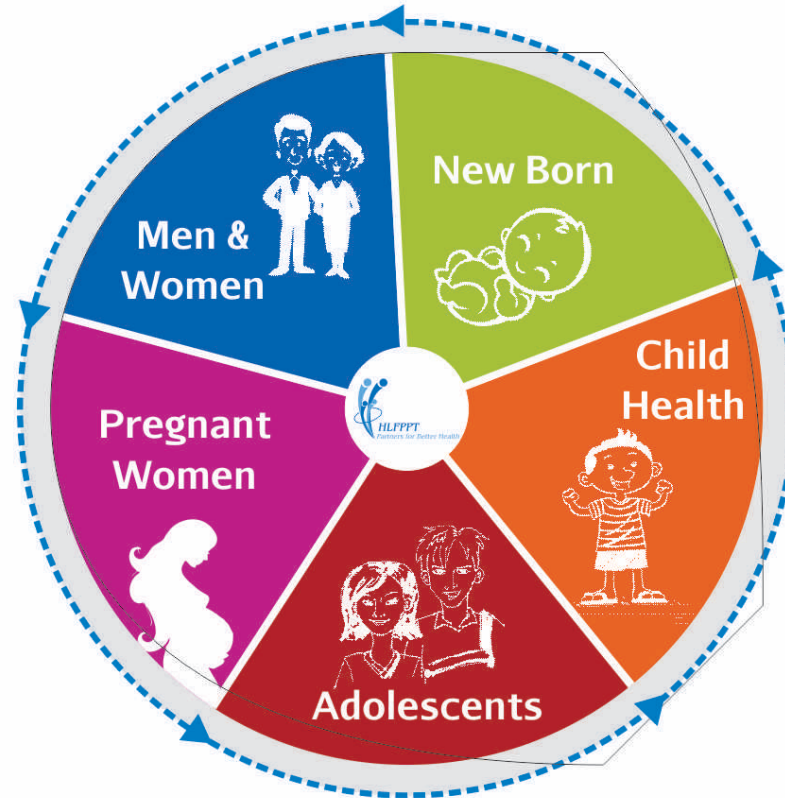
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Work through Life Cycle Approach



New Born	Child Health	Adolescents	Pregnant Women	Men & Women
<ul style="list-style-type: none"> ● Neonatal Intensive Care Unit (NICU) ● Immunization ● Diarrhea management ● DEIC ● Nutrition ● Early and exclusive breastfeeding 	<ul style="list-style-type: none"> ● Breastfeeding ● (DEIC) District Early Intervention Center ● Immunization ● Nutrition ● Cognitive Development ● Diarrhea Management ● Infant & Young Child Feeding (IYCF) 	<ul style="list-style-type: none"> ● Skills Prog ● Adolescent friendly health services ● Immunization ● Nutrition ● Menstrual Hygiene Management(MHM) 	<ul style="list-style-type: none"> ● Antenatal Care (ANC) ● Safe Delivery ● Post Natal Care (PNC) ● Birth Preparedness and Complications Readiness (BPCR) ● Prevention of Parent to Child Transmission (PPTCT) ● Early breastfeeding ● Capacity Building of providers 	<ul style="list-style-type: none"> ● FP products and services ● Nutrition ● Reproductive Health (HIV/ STI etc) ● Infertility ● Cervical and Breast cancer screening

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Peluang dan tantangan

Konsep dan inovasi

Take home messages

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1. Kesehatan reproduksi merupakan konsep pendekatan yang komprehensif sepanjang hayat.
2. Empat masalah utama dalam membangun Indonesia reproduksi sehat adalah, akses, kualitas pelayanan, kebijakan dan kesadaran masyarakat.
3. Salah satu upaya promotif dan pencegahan primer yang dilakukan untuk membangun Indonesia reproduksi sehat adalah dengan mengedepankan konsep perencanaan keluarga.
4. Kompetensi dalam upaya promotif dan preventif kesehatan reproduksi meliputi konsep perencanaan keluarga, pemberdayaan pasien dan penguasaan teknologi.



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